



Pentagram

Online version, Vol. 2, No. 48 Dec. 2, 2021

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Published For Joint Base Myer-Henderson Hall

Joint base holds annual tree lighting ceremony



Photos by Greg Jones, JBM-HH PAO

Top: Col. David Bowling, Joint Base Myer-Henderson Hall commander couldn't resist getting some time himself with Santa Claus during the Joint Base Myer-Henderson Hall annual holiday tree lighting ceremony, which featured the lighting of the base's holiday tree, a performance by the U.S. Army Band, Pershing's Own, carolling by community children, hot chocolate and cookies, and of course, an appearance by Santa Claus. **Left:** Children sing carols for the crowd during the annual tree lighting ceremony.

By Greg Jones
Joint Base Myer-Henderson Hall
Public Affairs Officer

Joint Base Myer Henderson Hall hosted its annual holiday tree lighting Dec. 1 at the base holiday tree in front of Building 59, opening the event at 5 p.m. with music from the U.S. Army Band, Pershing's Own.

This annual event, which was held in person for the first time since the beginning of the COVID-19 pandemic, has been a long time favorite of the community, who seemed glad to have the event back in person after a virtual ceremony last year.

Practicing social distancing and limiting the event to outside activities only, organizers hosted a safe, family friendly event that, in addition to the performance by the Army Band, included carols sung by the Mustang Choir from the Cody Child and Youth Services, remarks by the base commander, and of course, an appearance by Santa Claus.

To maintain safe distance for the children telling him their wishes, this year Santa did not sit with them. Rather, he listened to their wishes from a safe distance and exchanged high fives and fist bumps, instead of hugs.

To accomplish the annual first

lighting of the tree, the Joint Base Myer-Henderson Hall commander, Col. David Bowling, joined two military families who had lost their loved one in recent years, as is the long standing tradition for this event. Bowling also called up children in attendance and they all threw the 'switch' together lighting the festively decorated tree.

This year's families were the families of Lt. Col. Livingston Hickley and Maj. Kevin Gross. Hickley was an Army Ranger and served in Afghanistan and Iraq. He worked for the Hawaii National Guard for 20 years and his last assignment was at the National Guard

Bureau in Arlington, Virginia. He was 41 when he passed on Aug. 3, 2020. Gross joined the Army in January of 1990 and served at duty stations ranging from Hawaii to Virginia. He served in Operation Desert Storm and, in June of 2017, he graduated from the U.S. Army Command and General Staff College at Fort Leavenworth, Kansas; an accomplishment of which he was especially proud. He had 27 years of faithful service. He was 46 when he passed on March 14, 2018.

After the remarks, music, and appearance by Santa, attendees were treated to cookies and hot chocolate.

Army Public Health Center provides update on long COVID risks

By Douglas Holl
Army Public Health Center

It's been nearly a year since the Army Public Health Center first reported about long COVID and there have been a number of studies on this issue as well as some recent media reporting about how this may be impacting service members, civilians and their Families.

"Lingering symptoms of COVID-19 can persist for weeks or months after initial infection," said Dr. John Ambrose, Army Public Health Center senior advisor for Clinical Public Health and Epidemiology. "In fact, up to 37% of those infected with SARS-CoV-2 can have mild versions of COVID-19 symptoms. However, it is notable that those older than 65 and those with chronic medical conditions are more likely to suffer from long COVID."

According to the Centers for Disease Control and Prevention, post-COVID conditions are a wide range of new, returning or ongoing health problems people can experience four or more weeks after first being infected with the virus that causes COVID-19. Even people who did not have COVID-19 symptoms in the days or weeks after they were infected can have post-COVID conditions. The Department of Health and Human Services has also provided guidance that long COVID can be claimed as a disability under the Americans with Disabilities Act.

The most commonly reported symptoms, according to a DHHS FAQ about long COVID and ADA eligibility, include: Tiredness or fatigue; difficulty thinking or concentrating (sometimes called "brain fog"); shortness of breath or difficulty breathing; headache; dizziness on standing; fast-beating or pounding heart (known as heart palpitations); chest pain; cough; joint or muscle pain; depression or anxiety; fever or loss of taste or smell.

This list is not exhaustive. DHHS also said some people experience damage to multiple organs including the heart, lungs, kidneys, skin and brain.

A study of 273,618 electronic health records of COVID-19 survivors, published Sept. 28 in the academic journal PLOS Medicine, found that more than one-third of the COVID-19 patients had long COVID symptoms three to six months after a SARS-CoV-2 infection. The study also noted that

more than 46% of the patients aged 10-21 years had at least one long COVID symptom during the six-month period after the SARS-CoV-2 infection. Similarly, more than half of the nonhospitalized individuals also experienced one or more long COVID symptoms.

Ambrose agreed with studies showing long COVID can affect younger age groups, but the reasons for whom it affects are currently unknown.

"It should be noted that children affected by long COVID are relatively rare," said Ambrose. "Most children recover from COVID quickly. It is suspected that children with other chronic health conditions may be at a higher risk for development of long COVID."

Parents can now further protect their children as the CDC recommended everyone ages 5 and older get a COVID-19 vaccine to help protect against COVID-19.

The CDC's Morbidity and Mortality Weekly Report published Sept. 17 said higher rates of long-lasting symptoms after recovery from COVID-19 have been found among older adults, females, Blacks and persons with preexisting conditions.

A recent article published on Army.mil highlighted the experiences of a Fort Carson 30-year civil service veteran and a Directorate of Public Works housing manager, Debra Lamb, who contracted the COVID-19 virus late in 2020 and according to the article "experienced a harrowing ordeal before partially recovering months later."

After her initial illness, she was discharged from the intensive care unit at the UCHHealth Memorial Hospital in Colorado Springs, Colorado, with a diagnosis that included short-term memory loss, lung damage and congestive heart failure. And though she was back at work for DPW a few weeks later, she continued to feel less than 100%, and ultimately chose to go on a heart defibrillator to avoid a chance of heart failure.

"My heart was beating at about 25%," said Lamb. "Doctors prescribed medication to improve my condition, but after six months, those didn't seem to work well, so my doctors gave me three options — continue on the heart medica-



Photo illustration by Graham Snodgrass
According to the Centers for Disease Control and Prevention, Post-COVID conditions are a wide range of new, returning or ongoing health problems people can experience four or more weeks after first being infected with the virus that causes COVID-19.

tion, allow them to implant a heart defibrillator or take a chance of heart failure. I chose the defibrillator."

The article said doctors implanted the defibrillator in late June, but Lamb's not sure she's noticed significant improvement.

"I don't know if I feel better because I've convinced myself that I do or if it's actually happening," Lamb said. "It's certainly better than imminent death, though. Now, I'm considered a COVID-19 'long term.'"

Ambrose said despite these risk factors, it is possible for healthy service members to suffer from symptoms of long COVID. Symptoms could have long-term impacts on quality of life and personal readiness.

In an Army Times article published Sept. 17, three Soldiers were interviewed about their experiences with long COVID. One senior noncommissioned officer reported continuing symptoms more than a year after his initial infection. They included enduring shortness of breath, brain fog, fatigue, dizziness and short-term memory loss, which he felt might keep him from being able to do his job as a Soldier.

"I'm currently working about two, three hours a day and will max out at about 10 hours a week," he said. "I don't believe I am an asset to my organization ... I cannot get on a plane and deploy after a year (of recovery). That should be a no-brainer that I am separated ... I don't see the benefit of maintaining myself as an active-duty Soldier."

Ambrose said the likelihood of Soldiers being separated from service due to long COVID symptoms is low.

"While it is possible that long COVID patients could be separated from service if they develop severe symptoms, the risk of separation due to long COVID is unlikely," said Ambrose. "While long COVID can last weeks or months, symptoms do eventually resolve. As a result, it is unlikely service members will be separated."

Vaccination is one of the strongest protections from contracting Long COVID said Ambrose.

"While studies are still ongoing, preliminary information suggests that vaccination does offer some protection from long-term complications related to COVID-19," said Ambrose. "In fact, a recent study published by the New England Journal of Medicine reported that only 19% of those with breakthrough infections suffered lingering COVID-19 symptoms six weeks post infection."

The CDC said the best way to prevent post-COVID conditions is to prevent COVID-19 illness. For people who are eligible, "getting vaccinated against COVID-19 as soon as you can is the best way to prevent getting COVID-19 and can also help protect those around you. Stopping a pandemic takes all the tools in our toolbox."

Important Ways to Slow the Spread of COVID-19

Individuals should get a COVID-19 vaccine as soon as they can. Wear a mask that covers the nose and mouth so individuals can help protect themselves and others. Stay 6 feet apart from others who don't live in the same house. Avoid crowds and poorly ventilated indoor spaces. Individuals need to wash their hands often with soap and water. Use hand sanitizer if soap and water aren't available.

Pentagram



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TOG Soldiers compete in Best Ranger competition assessment



Photos courtesy of 3d U.S. Infantry Regiment (The Old Guard)

Old Guard Soldiers participate in a Best Ranger Competition assessment to see who would represent the Regiment in the overall Army Best Ranger Competition that will take place in 2022. The competitors pushed themselves physically and mentally through grueling obstacles on little sleep to see who is the best during an assessment at Fort AP Hill, Virginia.



(Above photo) Old Guard Soldiers participate in a Best Ranger Competition assessment to see who would represent the Regiment in the overall Army Best Ranger Competition that will take place in 2022.

(Right photo) An Old Guard Soldier climbs an obstacle during the Best Ranger Competition assessment to see who would represent the Regiment in the overall Army Best Ranger Competition that will take place in 2022. The competitors pushed themselves physically and mentally through grueling obstacles on little sleep to see who is the best during an assessment at Fort AP Hill, Virginia.

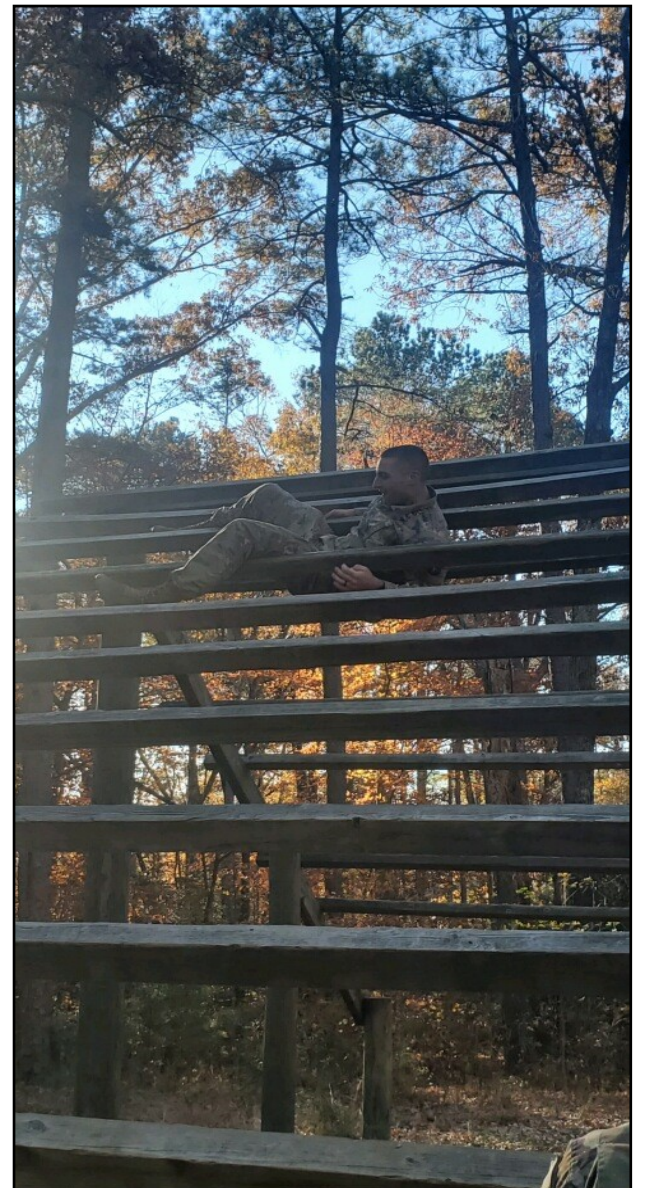




Photo by Air Force Tech. Sgt. Amy Lovgren

Airmen from the 133rd Airlift Wing, along with their Families and friends, take part in Family Day activities in St. Paul, Minnesota, Sept. 14, 2019.

DOD looks at ways to improve child care access

By C. Todd Lopez
DOD News

During the COVID-19 pandemic, the challenges faced by service members and their Families in getting child care demonstrated just how important child care is to the military mission. And now the department is working hard to find new ways to ensure that those who need child care can get it, the deputy assistant secretary of defense for military community and Family policy said.

“What the pandemic did, and what it showed us was that child care is not just a ‘nice to have,’” Patricia Barron, who spoke Nov. 23 as part of the Association of the U.S. Army’s “Thought Leaders” seminar, said. “You’ve got to have it. If you’re going to go to work, you’ve got to have your child care in place.”

Deputy Defense Secretary Kathleen H. Hicks has challenged the department, and MC&FP to uncover new and innovative ways to expand access to quality affordable child

care for military Families, Barron said. “We’ve been working really hard on what that could look like” she said. “And we’ve had a couple of things that I’m very, very proud of.” Earlier this year, Barron said, the department kicked off a pilot program that allows military Families to seek in-home child care providers, and the department will help pay for the cost.

“Now you can hire someone that comes into your home,” Barron said. “They still need to be vetted, and still kind of have to go through the process that we would if we were to hire anybody to work in our centers. But you hire someone that comes into your home. And we will provide you with fee assistance to help pay for their salary.”

Barron added that she hopes the program will be expanded next year. She also highlighted the Department of Defense’s “Military Child Care in your Neighborhood +” effort, which aims to get more child care providers eligible for fee-assistance by the DOD. Right now, that effort is underway in Maryland and

Virginia, but Barron said the program is expanding into other states as well.

“That’ll provide more opportunities for access to fee assistance,” she said.

For parents needing short-term child care — such as a babysitter — Barron said the DOD has partnered with “Sittercity.”

“If you go on to Military OneSource, we have waived the registration fee,” she said. “You can go right into the portal there and you can put in your information and a list of people will come up — and of course it’s up to you to talk to them and vet them and all of that. But they’ve had their background checks done.”

Barron said the DOD and the services are working hard to improve access to child care for military service members and their Families.

“There’s just never enough child care, because we have a young force,” she said. “You know, we’re always going to have young people coming in, we’re always going to have babies ... and children.”

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Financial readiness training

First term Soldiers must attend a financial readiness training upon arrival at JBM-HH, which is mandated by AR 608-1, 4-38, c. This training reviews how to develop a budget, credit-building strategies, making sense of the Thrift Savings Plan and more. Soldiers may elect to attend a group session or a one-on-one appointment.

To schedule training or for more information, contact Cheyanne Pace at Cheyanne.n.pace.civ@mail.mil or call (703) 696-3510.

Find support with JBM-HH ACS

At Army Community Service, people will find all kinds of programs and services that combine fun with self-improvement. The joint base ACS office continues to serve in person and virtually. To learn about available opportunities, call (703) 696-3510. All JBM-HH ACS programs support Soldiers, civilian employees and Families in maintaining readiness by coordinating and delivering comprehensive, responsive services that promote self-reliance, resiliency and stability.

Army Emergency Relief is here for Soldiers, Families

Army Emergency Relief is an invaluable resource for Soldiers and Families. Financial help is given in the form of an interest free loan, grant, or combination of the two. If a Family has a financial need, the Soldier should call ACS at (703) 696-3510. AER is open Monday through Friday from 7:30 a.m. to 4 p.m. Please note that documentation is required to justify the dollar amount for loans.

Weathering winter's wrath

Compiled by Risk Management Staff

Winter storms can bring extreme cold, freezing rain, snow, ice and high winds to much of the United States as well as increase the risk of vehicle accidents, hypothermia, frostbite, carbon monoxide poisoning and heart attacks from overexertion. Last winter, historic blizzards crippled cities as far south as Atlanta, Birmingham, Alabama, and Dallas-Fort Worth. As we approach the coldest months of the year, the Federal Emergency Management Agency encourages all Americans to be prepared for winter weather.

Prepare

- **Know your area's risk for winter storms.** Extreme winter weather can leave communities without utilities or other services for long periods of time.
- **Prepare your home to keep out the cold with insulation, caulking and weather stripping.** Learn how to keep pipes from freezing. Install and test smoke alarms and carbon monoxide detectors with battery backups.
- **Pay attention to weather reports and warnings of freezing weather and winter storms.** Sign up for your community's warning system. The Emergency Alert System and National Oceanic and Atmospheric Administration weather radio also provide emergency alerts.
- **Gather supplies in case you need to stay home for several days without power.** Keep in mind each person's specific needs, including medication. Do not forget the needs of pets. Have extra batteries for radios and flashlights.
- **Create an emergency supply kit for your car.** Include jumper cables, sand, a flashlight, warm clothes, blankets, bottled water and nonperishable



Courtesy photo

Winter storms can bring extreme cold, freezing rain, snow, ice and high winds to much of the United States as well as increase the risk of vehicle accidents, hypothermia, frostbite, carbon monoxide poisoning and heart attacks from overexertion.

- **Survive**
 - **Stay off roads if at all possible.** If trapped in your car, stay inside.
 - **Limit your time outside.** If you need to go outside, wear layers of warm clothing. Watch for signs of frostbite and hypothermia and begin treatment right away.
 - **Avoid carbon monoxide poisoning.** Only use generators and grills outdoors and away from windows. Never heat your home with a gas stovetop or oven.
 - **Reduce the risk of a heart attack.** Avoid overexertion when shoveling snow.
 - **Check on neighbors.** Older adults and young children are more at risk in extreme cold.
- **ble snacks.** Keep your vehicle's gas tank full.
- **Learn the signs of and basic treatments for frostbite and hypothermia.** For more information, visit the Centers for Disease Control and Prevention website at www.cdc.gov/disasters/winter/staysafe/index.html.

Recognize and respond

- **Frostbite** causes loss of feeling and color around the face, fingers and toes.
- **Signs:** Numbness, white or grayish-yellow skin and firm or waxy skin.
- **Actions:** Go to a warm room. Soak in warm water. Use body heat to warm. Do not massage or use a heating pad.
- **Hypothermia** is an unusually low body temperature. A temperature below 95 degrees is an emergency.
- **Signs:** Shivering, exhaustion, confusion, fumbling hands, memory loss, slurred speech and drowsiness.
- **Actions:** Go to a warm room. Warm the center of the body first — chest, neck, head and groin. Keep dry and wrapped up in warm blankets, including the head and neck.
- **Know your winter weather terms**
 - **Winter weather advisory.** Issued for accumulations of snow, freezing rain, freezing drizzle and sleet that will

- **cause significant inconveniences** and, if caution is not exercised, could lead to life-threatening situations.
- **Winter storm watch.** Alerts the public to the possibility of a blizzard, heavy snow, heavy freezing rain or heavy sleet. Winter storm watches are usually issued 12 to 48 hours before the beginning of a winter storm.
- **Winter storm warning.** Issued when hazardous winter weather in the form of heavy snow, heavy freezing rain or heavy sleet is imminent or occurring. Winter storm warnings are usually issued 12 to 24 hours before the event is expected to begin.
- **Take an active role in your safety** and be prepared for winter weather at home, work and in your car. For more information, download the FEMA app or visit Ready.gov and search for "winter storm."
- *Editor's note: All information provided by the Federal Emergency Management Agency.*

Chaplain's Corner

Forgiving others is best attitude for our hearts

By Retired Chaplain (Brig. Gen.) Ray Bailey
Former Deputy Chief of Chaplains

I don't know if this story is true, but the message is. A kindergarten teacher had decided to let her class play a game. The teacher told each child in the class to bring along a plastic bag containing a few potatoes. Each potato will be given a name of a person who the child hates, so the number of potatoes that a child will put in his/her plastic bag will depend on the number of people he/she hates.

So, when the day came, every child brought some potatoes with the name of the people he/she hated. Some had two potatoes; some three while some up to five potatoes. The teacher then told the children to carry with them the potatoes in the plastic bag wherever they go (even to the toilet) for one week.

Days after days passed by and the children started to complain due to the unpleasant smell let out by the rotten potatoes. Besides, those having five potatoes also had to carry heavier bags. After one week, the children were relieved because the game had finally ended.

The teacher asked, "How did you feel while carrying the potatoes with you for one week?" The children let out their frustrations and started complaining of the trouble that they had to go through having to carry the heavy and smelly potatoes wherever they went.

Then the teacher told them the hidden meaning behind the game. The teacher said, "This is exactly the situation when you carry your hatred for somebody inside your heart.

The stench of hatred will contaminate your heart and you will carry it with you wherever you go. If you cannot tolerate the smell of rotten potatoes for just one week, can you imagine what it is like to have the stench of hatred in your heart for your lifetime?"

The moral of the story is obvious but needing to be reminded.

Here are my takeaways:

- Throw away any hatred for anyone from your heart so that you will not carry them for a lifetime. The weight can become so heavy that you will stop moving forward in life.
- Forgiving others is the best attitude to have in our hearts. The smell is wonderful in comparison to a rotten potato.
- Listen for words and guidance in your faith



Photo by Ben Phillips, Michigan State University

Hollow heart in a potato.

and spiritual journey. The right thing will be obvious.

- Love others even if you don't like them. Consider it a sweet revenge.

Remember, in your most intimate relationships, true love is not loving a perfect person but loving an imperfect person perfectly. Just like they do for you.

JBM-HH Religious Services are on a weekly basis at Memorial Chapel. To view service updates, please visit the Religious Support Office Facebook page at <https://www.facebook.com/jbmhhrso> or email the Religious Support Office at usarmy.jbmhh.usag.mbx.memorial-chapel@mail.mil. Services are subject to cancellation in the event of inclement weather.

**Catholic Mass
Protestant Service
Gospel Service
Samoan Service**

**Saturday at 5 p.m. and Sunday at 9 a.m.
Sunday at 10:30 a.m.
Sunday at noon
Held the first Sunday of every month only at 2:30 p.m.**

The RSO now livestreams the following Sunday services via the JBM-HH Religious Support Facebook page:

**Protestant 10:30 a.m.
Gospel Service noon**

The Fort Belvoir Jewish Congregation host Saturday services and religion education opportunities for Families. For information about Saturday services and programs at Fort Belvoir, contact the Jewish coordinator, Sara Astrow by email at saralyn.astrow.ctr@mail.mil or phone at (703) 806-3393.

Sudden infant death syndrome— How to keep sleeping babies safe

By Janet Aker
MHS Communications

More than 1,000 young babies die in their sleep every year in America due to sudden infant death syndrome, also known as SIDS.

It's a terrifying thought for parents — the unexplained death of a seemingly healthy child less than a year old. The exact cause of SIDS remains unclear; doctors have been unable to fully explain the cause despite years of research.

However, there are several important precautions that parents of newborns can take to reduce the risk. Some of those safety measures for newborns include:

- Always put a baby down to sleep on their back — not the stomach.
- Keep objects out of the crib or bassinet — no pillows, no toys, no crib bumpers, no blankets.
- Consider having the baby sleep in the same room as a parent — but never in the same bed.

SIDS accounts for more than one out of three sudden or unexpected infant deaths in the United States each year.

For military Families, the Family Advocacy Programs at military installations offer a New Parent Support Program, which can provide one-on-one advice at home. The program offers up-to-date parenting practices supported by the latest research.

Although the incidents of SIDS and other sleep-related infant deaths have decreased in recent years, it remains a risk that parents and other caretakers should be aware of.

Most SIDS deaths happen among babies who are between 1 and 4 months' old, and 90% of SIDS deaths involve babies less than 6 months of age. However, SIDS deaths can happen anytime during a baby's first year.

Slightly more boys die of SIDS than girls but the reason for the gender difference is unknown, according to Dr. Stacey Frazier, a



Baby boy asleep on his back in a crib.

Courtesy photo

retired Air Force colonel who is now chief of inpatient pediatrics at William Beaumont Army Medical Center in El Paso, Texas.

A leading factor in SIDS is unsafe bedding, such as soft or loose blankets.

"Some of the reason for SIDS may be overheating," Frazier said, as "there is some evidence" that it affects a baby's breathing.

SIDS also may result from some object in the crib or bassinet that restricts a baby's ability to breathe as they move around in their sleep. Therefore, pediatricians recommend that "sleeping babies have no pillows, no toys, no crib bumpers, no blankets — nothing that can be pulled over the head," Frazier said.

There are special sleep sacks that can be used so that a baby cannot pull an item over his or her head. The sleep sacks are used in the maternity wards of some military hospitals.

One hard rule that must be followed: Babies should never sleep in the same bed as their parents, also known as "co-sleeping," said Dr. Rita Moreck, the chief of outpatient pediatrics at Fort Bliss's

Hugo V. Mendoza Soldier Family Care Center in Texas. Babies should be in a separate crib or bassinet next to a parent's bed. She said she regularly has to emphasize that directive to parents, and that co-sleeping still is a cause of sudden unexpected infant death.

Pacifiers during the night and sleeping in the same room with a parent are also recommended to reduce the potential for SIDS.

Babies should sleep in the same room as a parent for at least six months, or, ideally, until they are a year old.

"There may be some protective effect" from a pacifier and the presence of others in the room that keep a baby's brain more alert, Frazier said, "and a little bit more arousable."

The baby's sleeping space should have a hard flat surface and a mattress that meets Consumer Product Safety Commission standards, Moreck explained. Only a fitted sheet should be used on the surface, with no additional sheets or blankets, she added.

Breastfeeding the baby is important for many reasons. Frazier said there are theories that SIDS is

caused by some minor viral illness, and breastmilk has all the necessary antibodies to provide protection.

Recommendations from the American Academy of Pediatrics on how to reduce the risk of SIDS are one of the most cited sources of information for parents. The AAP recommendations include:

- Do not smoke during pregnancy, and do not smoke or allow smoking around the baby.
- Do not drink alcohol or use illegal drugs during pregnancy.
- Visit the baby's health care provider for regular well-baby checkups and vaccinations to prevent disease. Evidence suggests that immunizations can reduce the risk of SIDS by up to 50%.

Finally, there are many myths about SIDS:

- SIDS is not caused by vaccines, immunizations or shots
- SIDS is not contagious
- SIDS is not caused by cribs
- SIDS is not caused by vomiting or choking.

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Courtesy photo

While holiday lighting and electrical decorations do contribute to the splendor of the season, they can also significantly increase the risk of fires and electrical injuries if not used safely.

‘Tis the season to decorate safely

By Electrical Safety Foundation International

Very few things are as unique to the winter holiday season as the custom of decorating your home and yard. Findings from a 2013 Electrical Safety Foundation International consumer survey indicate that more than 86% of Americans decorate their homes as part of their winter holiday celebrations. Almost two-thirds of respondents use electric lights in their indoor decorating scheme, while more than half use lighted decorations outside their homes. More than 60% of those who decorate their homes for the holiday utilize at least one extension cord.

While holiday lighting and electrical decorations do contribute to the splendor of the season, they can also significantly increase the risk of fires and electrical injuries if not used safely. Given these safety hazards, it is crucial that safety is a foremost concern.

Indoor lights and electrical decor

- Always purchase electrical decorations and lights from reputable retailers.
- Use lights approved for safe use by a nationally recognized testing laboratory.
- Never connect more than three strands of incandescent lights together.
- Consider purchasing LED lights, which use less energy and run cooler than traditional incandescent lights.
- Before decorating, determine how many outlets are available and where they are located. Plan your displays accordingly.
- Match power needs (amperage) of electrical products with amperage rating of extension cords.

- Carefully inspect each electrical decoration. Cracked or damaged sockets, loose or bare wires and loose connections may cause a serious shock or start a fire.
 - Follow the manufacturer’s use and care instructions that accompany electrical decorations.
 - Avoid overloading electrical outlets with too many decorations or electrical devices. They can overheat and cause a fire.
 - Make sure that cords are not pinched in doors, windows or under heavy furniture, which could damage the cord’s insulation.
 - Do not mount or support light strings in a way that might damage the cord’s insulation.
 - Always unplug electrical decorations before replacing bulbs or fuses.
- Turn off all indoor and outdoor electrical decorations before leaving home or going to sleep.

Outdoor decorations

- Make sure all extension cords and electrical decorations used for outdoor decorating are marked for outdoor use.
- Match power needs (amperage) of electrical products with amperage rating of extension cords.
- Outdoor electric lights and decorations should be plugged into circuits protected by ground fault circuit interrupters. If circuits are not GFCI-protected, portable outdoor GFCIs can be purchased where electrical supplies are sold and require no special knowledge or equipment to install.
- Inspect all lights, decorations and extension cords for damage before using.
- Fasten outdoor lights securely to trees, the

- house or other firm supports to protect them from wind damage, but take care not to attach the lights in a way that could damage the cord’s insulation.
 - Keep all extension cords and light strings clear of snow and standing water.
 - Make sure spotlights used to illuminate decorations are well-ventilated, protected from weather and a safe distance from flammable items.
 - Inspect ladders for loose or missing screws, hinges, bolts and nuts before using.
 - Use wooden or fiberglass ladders when decorating outdoors. Metal ladders conduct electricity.
 - Use the right ladder height, ensuring ladders extend at least three feet past the edge of the roof.
 - Exercise caution when decorating near power lines. Individuals should keep themselves and their equipment at least 10 feet from power lines.
 - Avoid overloading electrical outlets with too many decorations or electrical devices. They can overheat and cause a fire.
 - Make sure that cords are not pinched in doors, windows or under heavy furniture, which could damage the cord’s insulation.
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Education key to knowing RSV symptoms

By **StatePoint**

While COVID-19 and influenza continue to make headlines, another contagious respiratory virus has been spreading at an alarming rate, one which can be severe and even life-threatening to infants and toddlers.

Indeed, respiratory syncytial virus is so common that nearly 100% of children have been infected with the virus by age 2. It's also the leading cause of hospitalizations in all infants. While most people, including infants, develop only mild symptoms, for some, it can progress to severe complications. Despite these facts, many parents have never heard of RSV. This is why the American Lung Association is working to educate expectant mothers, parents and caregivers about RSV's symptoms, when to contact a healthcare provider and the steps they can take to protect themselves and their children.

"Typically, peak season for RSV infection in the United States is fall through spring, however, a rise in cases in the summer of 2021 prompted a health advisory from the Centers for Disease Control and Prevention," said Albert Rizzo, M.D., chief medical officer for the Lung Association. "With people taking fewer precautions as COVID-19 restrictions are lifted, RSV is spreading at an unusually high rate."

Recognizing RSV

Here are the symptoms of RSV, as well as how to recognize signs

that may indicate a worsening ill-

"spreading-out" of the nostrils

Preventing Infection

RSV is spread through close contact with someone who's infected via coughing and sneezing, or from touching objects such as toys or doorknobs that have the virus on them.

"Those in contact with an infant or young child, especially if they were born prematurely, are very young, have chronic lung or heart disease, a weakened immune system, or have neuromuscular disorders, should take extra care to keep them healthy by washing hands, covering coughs or sneezes and avoiding them when sick, if at all possible," Rizzo added.

There's no vaccine yet to prevent RSV, but sci-

entists are working hard to develop one. However, everyone can help stop its spread in the following ways:

- Avoiding close contact with infected people.
- Avoiding sharing cups, bottles or toys that may be contaminated with the virus.
- Washing hands with soap and water after coming into contact with an infected person.

For more information about RSV, visit [Lung.org/RSV](https://www.lung.org/RSV).

For parents of little ones, being aware of RSV is critical during its peak season and beyond.



Photo by Ju Photographer / iStock via Getty Images Plus
Respiratory syncytial virus, which is contagious, has been spreading at an alarming rate, one which can be severe and even life-threatening to infants and toddlers.

- ness:
- Mild cold-like symptoms, including congestion, runny nose, fever, cough and sore throat.
 - Very young infants may be irritable, fatigued and have breathing difficulties.
 - A barking or wheezing cough can be one of the first signs of a more serious illness.
 - Infants with severe RSV will have short, shallow, rapid breathing. This can be identified by a "caving-in" of the chest between and under the ribs (chest wall retractions), a

with every breath (nasal flaring), and abnormally fast breathing. In addition, the mouth, lips and fingernails may turn bluish due to lack of oxygen.

When to call the doctor: Parents should call their pediatrician if their child has a poor appetite or decreased activity level, cold-like symptoms that become severe, a shallow cough that continues day and night, or their child is experiencing any new, worrisome symptoms. They should seek emergency care if their child is having trouble breathing.

COVID-19

Am I eligible for a booster shot?

Who?

If you received a Pfizer or Moderna series:

> 65 years and older

> Age 18+ who live in long-term care settings

> Age 18+ who have underlying medical conditions

> Age 18+ who work or live in high-risk settings

If you received a J&J vaccine:

> Age 18+




When?


> At least 6 months after Pfizer or Moderna

> At least 2 months after J&J

Which booster shot do I get?

> You may have a preference, but you can get any booster shot.





FIND OUT MORE AT [CDC.GOV](https://www.cdc.gov) & [VACCINES.GOV](https://www.vaccines.gov)

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News Notes

Myer Fitness new hours

The Myer Fitness Center has new hours of operation, which are from 5 a.m. to 8 p.m. Monday through Friday and from 7 a.m. to 3 p.m. Saturday, Sunday and holidays. The fitness center will be closed, however, Thanksgiving this year.

The McNair Fitness Center is open 24/7 daily for those with registered access. Registration for McNair Fitness Center is by appointment only. People can call and make an appointment to register for the 24/7 access by calling Lyndia Mease at (571) 315-9125 Monday through Friday from 9 a.m. to 5 p.m.

The Smith Gym at Henderson Hall has new hours. The Smith Gym operational hours are Monday through Friday from 5 a.m. to 7:30 p.m. and weekends from 8 a.m. to 2 p.m.

Welcome back to the bowling center

The JBM-HH Bowling Center is now open at capacity with lanes for bowling and seating for indoor dining. All with base access are welcome. The bowling center grill continues to offer its grab-n-go food service during the center's hours of operations, which are from 7 a.m. to 7 p.m. Monday through Thursday and 7 a.m. to 8 p.m. Fridays. The bowling center is not open during weekends at this time.

Federal benefits open season begins

The federal benefits open season for the 2022 plan year for health insurance under the FEHB Program, dental and vision insurance under FEDVIP, and flexible spending accounts under FSAFEDS will be held through Dec. 13. Federal benefits open season gives federal employees and other eligible individuals the opportunity to review their plans, make changes and enroll in one of 275 FEHB plan choices for 2022. This is also the time for annuitants to reevaluate their plans and decide if they are optimally covered. Individuals can explore their options and learn more about the program at opm.gov/openseason.

Death notice

Maj. Spencer T. Johnson, U.S. Army Element-Defense Intelligence Agency, passed away Nov. 04.

Anyone with debts owed to or by the estate of Johnson must contact Maj. David Norton, the summary-court officer for the Soldier. For more information, call Norton at (202) 231-2592.

Domestic violence community roundtable

The JBM-HH Army Community Service Family Advocacy Program recently sat in an Arlington County Community Roundtable in support of domestic violence

awareness. Missed the event? The talk can be viewed on YouTube at <https://youtu.be/5U-i-O4GSguU>. Please note that YouTube links may not be accessible via a government computer.

Motorcycle training

Free motorcycle training is being offered for service members. Get it now and the training is good for 12 months. Beat the spring rush. If service members are thinking about buying or renting a motorcycle or motor scooter, Fort Belvoir offers Motorcycle Safety Foundation "Basic Rider Course Update." The instructors provide training motorcycles and helmets. Students bring boots, long pants and sleeves and a warm coat. Class begins at 6:45 a.m. and ends before 2 p.m. The location for the training is Bldg. 259, the old swimming pool house behind 5915 16th St., Fort Belvoir, VA 22060. To register, call (703) 806-3447 or from a government computer, visit <https://imc.army.mil/airs>. All services are trained. The Army has only two training sites in the NCR, Forts Belvoir and Meade. Fort Belvoir also offers BRC2/ERC and/or SportBike class for riders with less than 12 months on a BRC card, and as mandatory refresher every five years.

Civilian leave assist

JBM-HH Directorate of Emergency services employees Ashish Sangroula, Danpats Mwesigwa and Brian Sutton, Directorate of Public Works employees Huey Vample, Wanda Scott and Lisa Barnes have been approved to receive leave under the Volunteer Leave Program. Department of the Army civilian employees who would like to donate annual leave can fill out form OPM630a, "Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program (Within Agency)," at www.opm.gov/forms/pdf_fill/opm630a.pdf.

For federal government civilian employees outside the Department of the Army who would like to donate annual leave, please complete form OPM 630b, "Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program (Outside Agency)," at www.opm.gov/forms/pdf_fill/opm630b.pdf.

Auto detailing shop now open

DFMWR has opened Graphics-N-Tints Car Detailing Services at the DFMWR Auto Skills Center, Bldg. 227. The shop is open Wednesday and Thursday from 4 to 8 p.m., Friday from 1 to 8 p.m., Saturday from 10 a.m. to 5 p.m. and closed Sunday through Tuesday. A soft reopening was Friday and the grand reopening will be sometime next month.

Car Detail services are available to be scheduled via email at usarmy.jbmhh.imcom-fmwrc.mbx.cac-reservations-and-requests@mail.mil or call Mitch Thompson at (703) 696-7863. All payments for car detail services are to be made directly to a Family and MWR staff member at the Community Activity Center — Leisure Travel service desk. All payments must be paid by credit cards. Payment will not be made directly to the contractor.

Vehicle must be scheduled for an appointment prior to dropping off; then, drop keys into the drop box on the front door of the Auto Skills Center and an individual should park his or her vehicle in an empty parking slot. The individual will be contacted by the vendor later. The drop off location is the Auto Skills Center on Forest Circle, Bldg. 227, Fort Myer, VA 22211.

Please direct any questions or concerns to the Community Activity Center supervisor Mitch Thompson at (703) 696-7863.

For a list of services, visit the Auto Skills Center Detailing Service at <https://jbmhh.armymwr.com/programs/auto-crafts-skills> or call (703) 696-7863 from 11 a.m. to 5 p.m. Monday through Friday. To schedule an appointment and to pay for services, visit Bldg. 405, the JBM-HH Community Activity Center, which is next door to the JBM-HH bowling alley.

Education center hours

The JBM-HH Education Center Hub to include JBM-HH, Forts Belvoir, Meade and Detrick, will close weekly for training Thursday mornings from 8 to 10 a.m. The goal of the training is to provide better customer service to service members, veterans, retirees, dependents and civilians.

JBM-HH face mask policy

According to the Centers for Disease Control and Prevention, Washington, D.C., and Arlington County are now "substantial" transmission areas for COVID-19 and the Delta variant. Face coverings are now required in all indoor settings on Myer, McNair and Henderson Hall — regardless of vaccination status. The mask mandate remains in place for all unvaccinated individuals — indoors and outdoors.

Barber shop hours

The American Clipper Barber Shop at Henderson Hall will have new hours of operation: Monday through Friday from 8:30 a.m. to 5:30 p.m.; Saturday from 9:30 to a.m. 4:30 p.m.; and Sunday from 10 a.m. to 4:30 p.m.

Dine at Hill Grill

DFMWR Patton Hall "The Hill Grill" Outdoor Dining is now open

from 11 a.m. to 3 p.m. Monday through Friday adjacent to the tennis courts on Jackson Avenue. Enjoy lunch under our large canopy, tables with umbrellas, picnic tables or to go. Menu options will feature limited time offers, popular ethnic cuisines and traditional outdoor grill menu items.

For more information on "The Hill Grill," call the Patton Hall Community Club and Conference Center at (703) 524-0200.

Leisure, travel new operating hours

There are new operation hours for the JBM-HH Leisure Travel Service, located in the joint base community center. The service office hours are Wednesday through Friday from noon to 6 p.m. For more information, call (703) 696-7863 or email MWR representative Mitchell Thompson at mitchell.l.thompson2.civ@mail.mil.

N2L Senior Fitness Class

The Directorate for Family and Morale, Welfare and Recreation announces it has restarted its "Never Too Late" Senior Fitness Class at the Community Activity Center, Bldg. 405, on the Myer side of the joint base. The class is held from 9:45 to 11 a.m. Monday, Wednesday and Friday. The N2L fitness class consists of stretching, balance and strength, and is taught by certified fitness instructors who are U.S. Army volunteers. The class is designed to help participants maintain a high level of fitness and enjoy an active lifestyle, while those recovering from hip, back or knee operations find the class ideal as part of the healing process. There is no charge for the class. Seniors are encouraged to make a commitment to get their blood pressure, blood sugar and weight under control and improve and maintain fitness levels. All individuals have to do is show up in their PT gear and wear a mask — COVID-19 safety protocols are maintained during the class.

For more information, please contact Chester Taylor at gotlander6@gmail.com.

Virtual transition services

The JBM-HH Transition Assistance Program wishes to remind the joint base community that all services are currently virtual. The TAP facility, located in Bldg. 404, is currently under construction. The building is closed to public access at this time. Employees who wish to enter the building in the interim must report to the trailer south of Bldg. 404, near the loading dock, to receive the proper personal protective equipment.

Protect information

Individuals should be skeptical of anyone contacting them from the federal government. No agency will call, email or text demanding personal information or money to get a COVID-19 vaccine certificate or passport.